



The Courage to Refuse to Cooperate in Evil

"Some helpful 'principles of cooperation' have been developed over the centuries in the Catholic moral tradition as a way of discerning how properly to avoid, limit, or distance ourselves from evil, especially intrinsically evil actions."



An electrician by trade, Tim Roach is married with two children and lives about an hour outside Minneapolis. He was laid off his job in July 2009. After looking for work for more than a year and a half, he got a call from his local union in February 2011 with the news anyone who is unemployed longs for, not just a job offer, but one with responsibility and a good salary of almost \$70,000 a year. He ultimately turned the offer down, however, because he discovered that he was being asked to oversee the electrical work at a new Planned Parenthood facility under construction in St. Paul on University Avenue. Aware that abortions would be performed there, he knew his work would involve him in "cooperation with evil," and he courageously declined the offer.

Significant moral issues can arise if we knowingly cooperate in another's evil actions, even though we don't perform those evil actions ourselves. Some helpful "principles of cooperation" have been developed over the centuries in the Catholic moral tradition as a way of discerning how properly to avoid, limit, or distance ourselves from evil, especially intrinsically evil actions. In particular, these principles enable us to recognize that there are certain real-life situations where we

must refuse to cooperate.

A simple example can be helpful to illustrate some of these principles: suppose a nurse were to hand the instruments to a physician performing a direct abortion, or turn on the suction machine used to dismember the unborn baby. If the nurse intended the abortion, she would be guilty of *formal cooperation* in evil. Yet even if she personally opposed the abortion and did not share the intention of the physician performing the procedure, there would still be grave moral objections to her cooperation. Because she would be participating in circumstances essential to the performance of that particular act of abortion, like handing instruments or turning on the suction machine, her cooperation would be morally unacceptable, and would be known as *immediate material cooperation*.

The key point, then, is that both types of cooperation (formal and immediate material) are morally unacceptable. Whenever we are faced with the temptation to cooperate in *intrinsically evil actions* like abortion, destruction of embryos for stem cell research, euthanasia, assisted suicide, or direct sterilization, morally we must refuse. This is different, for

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example, from what theologians call "remote cooperation" in another's evil, as, for example, is done by the postal carrier who delivers letters to an abortion facility; although what occurs there might sicken the carrier's stomach, delivering the mail would not constitute an essential ingredient to the wrongful destruction of human life that occurs there.

On the other hand, driving someone to an abortion clinic so she can undergo an abortion, assisting as a nurse in the operating room during a tubal ligation, or thawing out human embryos from the deep freeze so that a researcher might vivisect them for their stem cells — even if we opposed the practices — all would constitute unacceptable forms of immediate material cooperation with evil.

Real world decisions about cooperation can be daunting and complex. Pharmacists, for example, cannot in good conscience provide the morning-after pill for use by a woman who has had consensual sex and wishes to avoid a pregnancy. The morning-after pill has a contraceptive effect, and may sometimes also work by altering the uterine environment and preventing implantation of an embryo (causing a pregnancy

loss/abortion). Even if the pharmacist personally opposed both contraception and abortion, by providing the pill and knowing the purposes to which it would be put, he would cooperate in wrongdoing in an immediate and material way.

In fact, a pharmacist in these circumstances would not even be able to refer the woman to a co-worker, because if he were to do so, he would still be cooperating in an essential way in the causal chain leading to the prevention or ending of a pregnancy. He would rather have to decline to assist her, forcing the woman herself to initiate a new sequence of choices and actions that would not involve him — approaching a different pharmacist, for example, who might then provide the drug. For a pharmacist to choose the morally correct course of action in this situation not only requires fortitude, but also could cause significant tension with his supervisor, the pharmacy owner and with others who work there, particularly if such a scenario had not been discussed ahead of time.

Modern health care is replete with situations that tempt us to cooperate immorally in evil. Clearly, certain activities like abortion are not authentic medicine at all, but rather,

acts of immorality veiled behind the professionalism of white coats and institutional protocols. Great care, discretion, and courage are required as we seek to avoid cooperation in medical situations where immoral practices may not only be tolerated, but even at times almost imposed on us.

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